

## **HAWAII STATE ETHICS COMMISSION**

1001 BISHOP STREET, PACIFIC TOWER 970 P.O. BOX 616, HONOLULU, HAWAII 96809

TEL.: 587-0460 FAX: 587-0470



Algara Hirana

## LOBBYIST REGISTRATION FORM

(See back of this form for instructions)

	(Type or Prir	nt Clearly)	H.C. C. H.R	
PART I LOBBYIST				
NAME(Last)	(First)	(Middle)		TT. TO. (0)
AMEMIYA.	RONALD	(Middle)		523-0084
MAILING ADDRESS (Street)		(City)	(0)	
737 BISHOP ST.,	SILTE 2100	· · · · · · · · · · · · · · · · · · ·	(State)	(Zip Code)
	*	HONOLULU	#工	96813
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby) TELEPHONE				
MAILING ADDRESS (Street)		(City)	(State)	(Zip Code)
L				
PART II ORGANIZATION				
NAME OF ORGANIZATION YOU LOBBY F	OP (Do not obbroviote)	Control of the Contro		
	um Marki	ters a sari	Tion	TELEPHONE
MAILING ADDRESS (Street)	and 1 to cross	(City)		5229751
P.O.Box 500	Ho	White	(State)	(Zip Code)
NAME OF PERSON RESPONSIBLE FOR F			MENT	76809 TELEPHONE
Tom Malor				5229751
MAILING ADDRESS (Street)	<u> </u>	(City)	(State)	(Zip Code)
P.O. Box 50	12 Ha	nolula	HT	
1.0.004 30	0 700	rounc		96809
PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY				
	ADOLOTO OF OR WITH	ON TOO EXPECT TO	LUBBI	
Agriculture	Education	Human Services	S	cience, Technology & conomic Development
Communications & Public Utilities	Government Operations & Finance	Intergovernmental International Affairs	Relations, T	ourism & Recreation
Consumer Protection & Commerce	Hawaiian Affairs	Labor & Employme	ont 🔽 T	ransportaion
Culture, Arts, Historic Preservation	Health	Planning, Land & W Use Management	Vater C	ther: (indicate below)
Ecology, Energy,	Housing	Public Safety & Co	rrections	
Environmental Protection	. rodomig	1 done callety & co.	riections	
		i vita i sa mara na mata na ma Na mata na mat	<u>a de la companya de</u>	
PART IV CERTIFICATION OF LOBBYIST				
I hereby certify that the informa	tion furnished above is,	, to the best of my kno	wledge, correc	t and complete.
Kenold a anon	run		feb 18	2002
	re of Lobbyist)		(Date	The state of the s
				7
PART V AUTHORIZATION TO	LOBBY			
NAME	1/x)	TITLE OF AUTHORIZING		, 1
JAMES J. C. HAYNES II Board member				
NAME OF ORGANIZATION (if applicable)	······································		· · · · · · · · · · · · · · · · · · ·	TELEPHONE
				270-2820
MAILING ADDRESS (Street)		(City)	(State)	(Zip Code)
385 Hukil	iko St #201/	Ka Kului	HT	96737
I hereby authorize the above-named person to engage in lobbying activities on behalf of the undersigned.				
* Xams &	C Duy			4/2/03
(Signature of Authorizing	Officer or Person Represent	ed)	(Date	e)